

USM-285 is a 5-part form. Fill out the form and print 5 copies. Sign as needed and route as specified below.

U.S. Department of Justice
United States Marshals Service**PROCESS RECEIPT AND RETURN**
See "Instructions for Service of Process by U.S. Marshal"

PLAINTIFF UNITED STATES OF AMERICA		COURT CASE NUMBER 15-CR-476	
DEFENDANT David Morales-Meza		TYPE OF PROCESS Asset Disposal - FOF (criminal)	
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN USMS E/PA		
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 601 Market Street, Room 2110, Phila, PA 19106		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		Number of process to be served with this Form 285	RECEIVED UNITED STATES MARSHAL EASTERN DISTRICT OF PENNSYLVANIA 2019 SEP -4 AM 11:19
Jessica McKavanagh - Contractor United States Attorney Office - EDPA 615 Chestnut Street, Suite 1250 Philadelphia, PA 19106		Number of parties to be served in this case	
		Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

Fold

Per the Final Order of Forfeiture, please dispose of the assets listed in ID 16-FBI-003895 in a way consistent with USMS procedures. AUSA Sarah Grieb approved destruction, via email dated 8/22/2019.

Signature of Attorney other Originator requesting service on behalf of <i>Jessica McKavanagh</i>	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER 215-861-8389	DATE 9/3/19
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. <i>6</i>	District to Serve No. <i>6</i>	Signature of Authorized USMS Deputy or Clerk <i>[Signature]</i>	Date 9/4/19
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I hereby certify and return that I ☐ have personally served, ☐ have legal evidence of service, ☒ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode	
Address (complete or different than shown above)	Date 12-5-19	Time 12:55 <input type="checkbox"/> am <input checked="" type="checkbox"/> pm
	Signature of U.S. Marshal or Deputy <i>[Signature]</i> #5769	

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
					\$0.00

REMARKS:

ASSET DESTROYED.

PRINT 5 COPIES

- CLERK OF THE COURT
2 USMS RECORD
3 NOTICE OF SERVICE
4 BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5 ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED

Form USM-285
Rev 12/15/80
Automated 01/00